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PATENT APPLICATION FEE DETERMINATION
Substitute for Form PTO-875

| CLAIMS AS FILED - PART I | | | |
|---|----------------------------------|------------------------------------|---------------|
| (Column 1) | | (Column 2) | |
| FOR | NUMBER FILED | NUMBER EXTRA | |
| BASIC FEE (37 CFR 1.16(d)) | | | \$ _____ |
| TOTAL CLAIMS (37 CFR 1.16(g)) | minus 20 = | | \$ _____ |
| INDEPENDENT CLAIMS (37 CFR 1.16(d)) | minus 3 = | | \$ _____ |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | |
| * If the difference in column 1 is less than zero, enter '0' in column 2. | | | |
| CLAIMS AS AMENDED - PART II | | | |
| (Column 1) | | (Column 2) | |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESERVE EXTR |
| Total (37 CFR 1.16(d)) | 13 | minus ** 90 | = |
| Independent (37 CFR 1.16(d)) | 3 | minus *** 7 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | |
| (Column 1) | | (Column 2) | |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESERVE EXTR |
| Total (37 CFR 1.16(d)) | 11 | minus ** 90 | = |
| Independent (37 CFR 1.16(d)) | 3 | minus *** 7 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | |
| (Column 1) | | (Column 2) | |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESERVE EXTR |
| Total (37 CFR 1.16(d)) | 9 | minus ** 90 | = |
| Independent (37 CFR 1.16(d)) | 3 | minus *** 7 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | |

1/21/05

1/8/07

If the entry in column 1 is less than the entry in column 2, write '0' in column 2.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than the "Highest Number Previously Paid For" IN THE FORM, the "Highest Number Previously Paid For" (Total or Independent) is the same as in the form.
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This collection of information is required by 37 CFR 1.16. The information will be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 1,141, including gathering, preparing, and submitting the completed application data to the USPTO. This collection is estimated to take 12 minutes to complete. Comments on the amount of time you require to complete this form and/or suggestions for reducing this burden may be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

| RECORD | | Application or Docket Number 09/547,284 | |
|-----------------|----------------|---|----------------|
| | | OTHER THAN SMALL ENTITY | |
| SMALL ENTITY | OR | RATE | FEES |
| | | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| TOTAL | | TOTAL | |
| | | OTHER THAN SMALL ENTITY | |
| SMALL ENTITY | OR | RATE | ADDITIONAL FEE |
| | | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |
| | | OTHER THAN SMALL ENTITY | |
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | | | |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |
| | | OTHER THAN SMALL ENTITY | |
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | | | |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |
| | | OTHER THAN SMALL ENTITY | |
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | | | |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| X \$ _____ | OR | \$ _____ | \$ _____ |
| TOTAL ADD'L FEE | | TOTAL ADD'L FEE | |

If the entry in column 1 is less than the entry in column 2, write '0' in column 2.
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1-800-PTO-9199 and select option 2